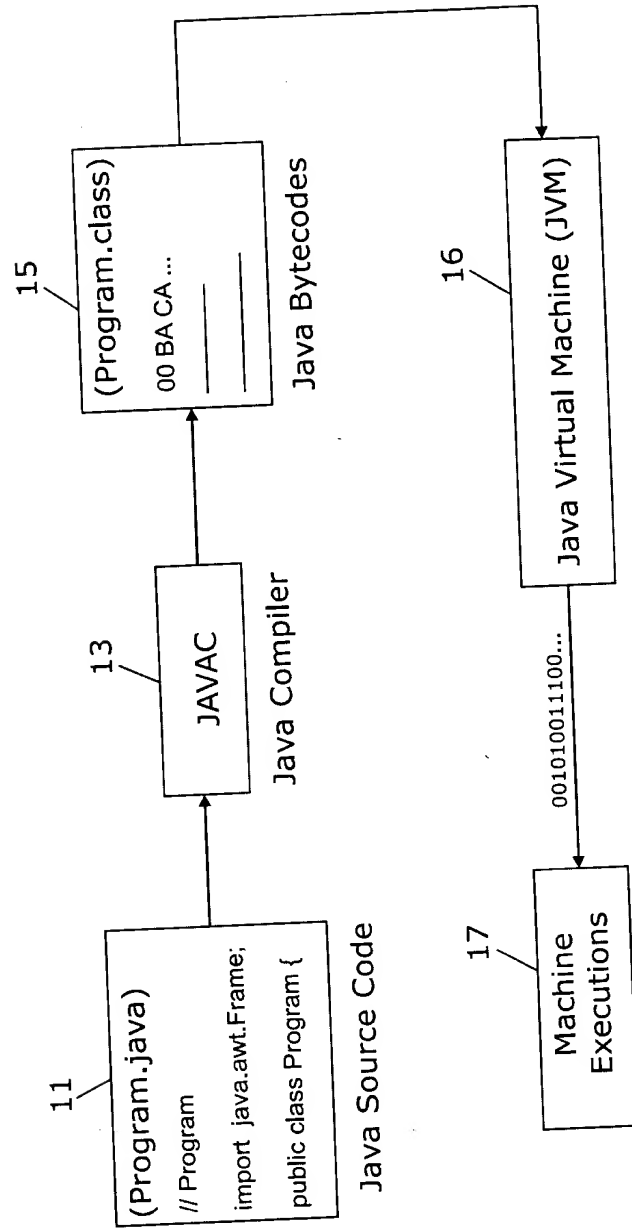
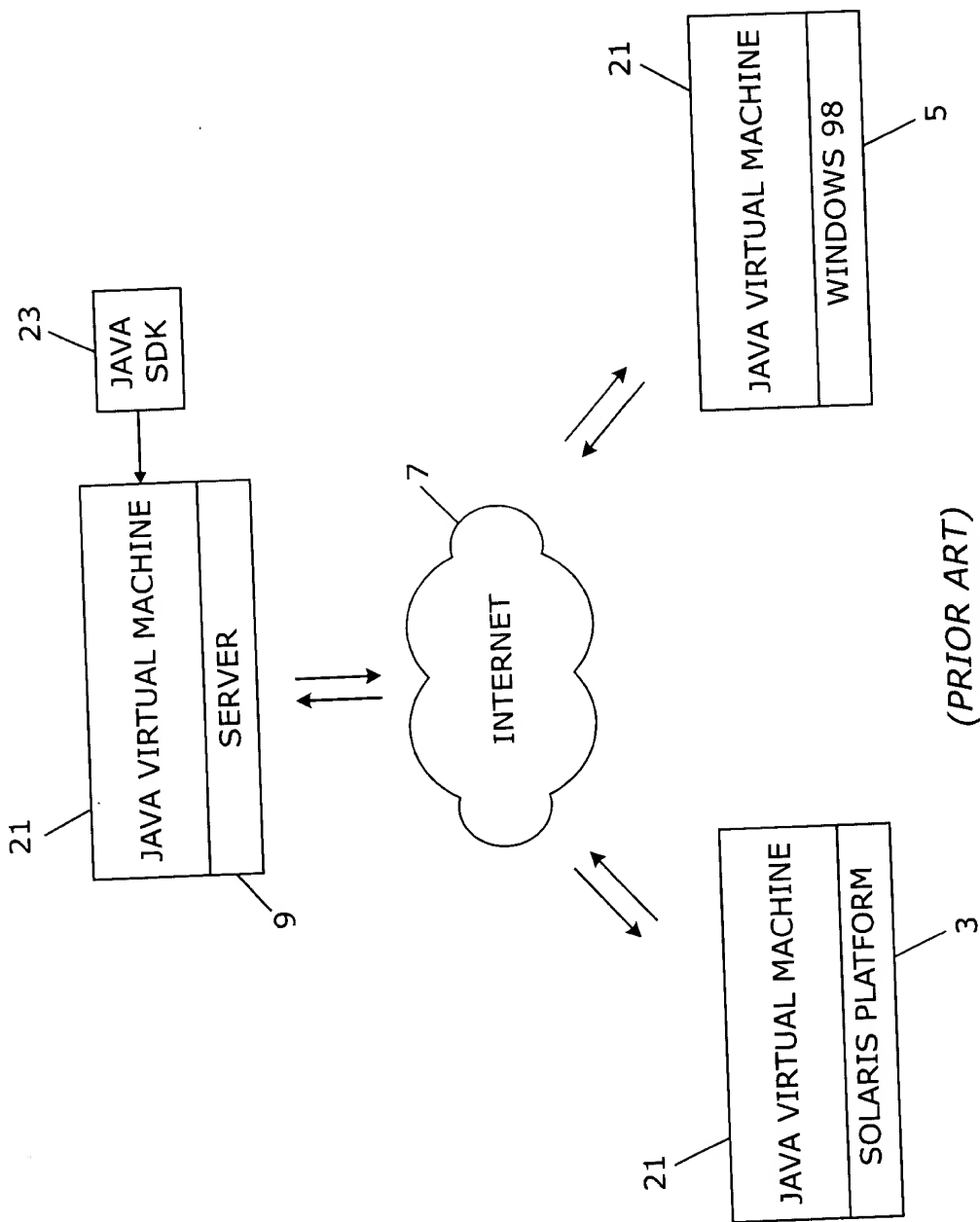


(PRIOR ART)
FIGURE 1



(PRIOR ART)
FIGURE 2



(PRIOR ART)
FIGURE 3

31

My Application

File Edit View Help

Subscription

File Edit View Help

ENTER YOUR INFORMATION BELOW:

PREFIX: ☐ MR ☐ MS ☐ DR]

NAME:

ADDRESS:

STATE: TX

YOU WISH TO RECEIVE (CHECK ALL THAT APPLY):

☒ BROCHURE

☒ EMAIL ☐ US MAIL

☒ QUOTE

☐ EMAIL ☐ US MAIL ☒ TELEPHONE

☐ OTHER

DESCRIBE

SUBMIT RESET

Provide Telephone Numbers

WORK NUMBER:

HOME PHONE:

CELL PHONE:

FIGURE 4 (PRIOR ART)

FIG. 5

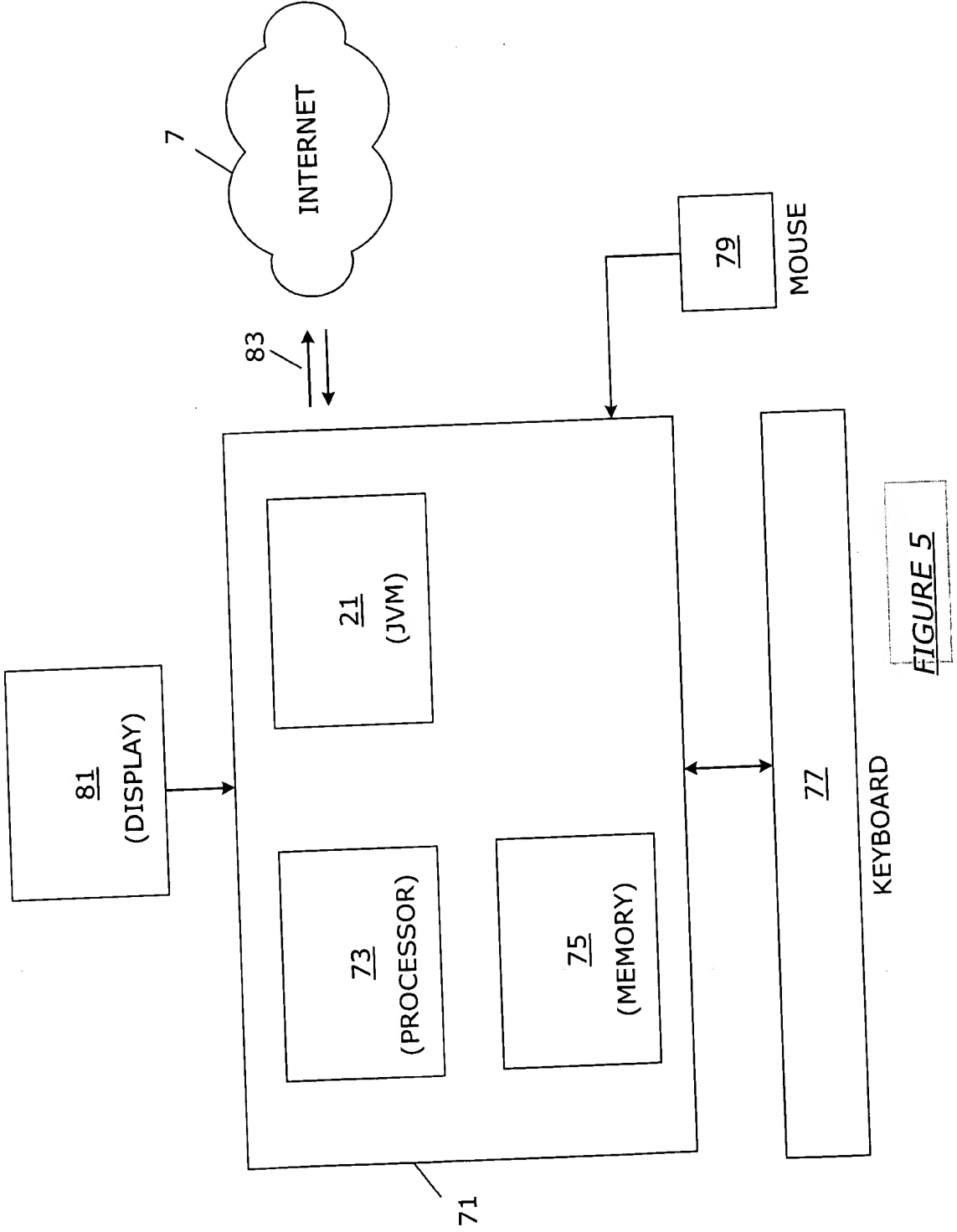


FIGURE 5

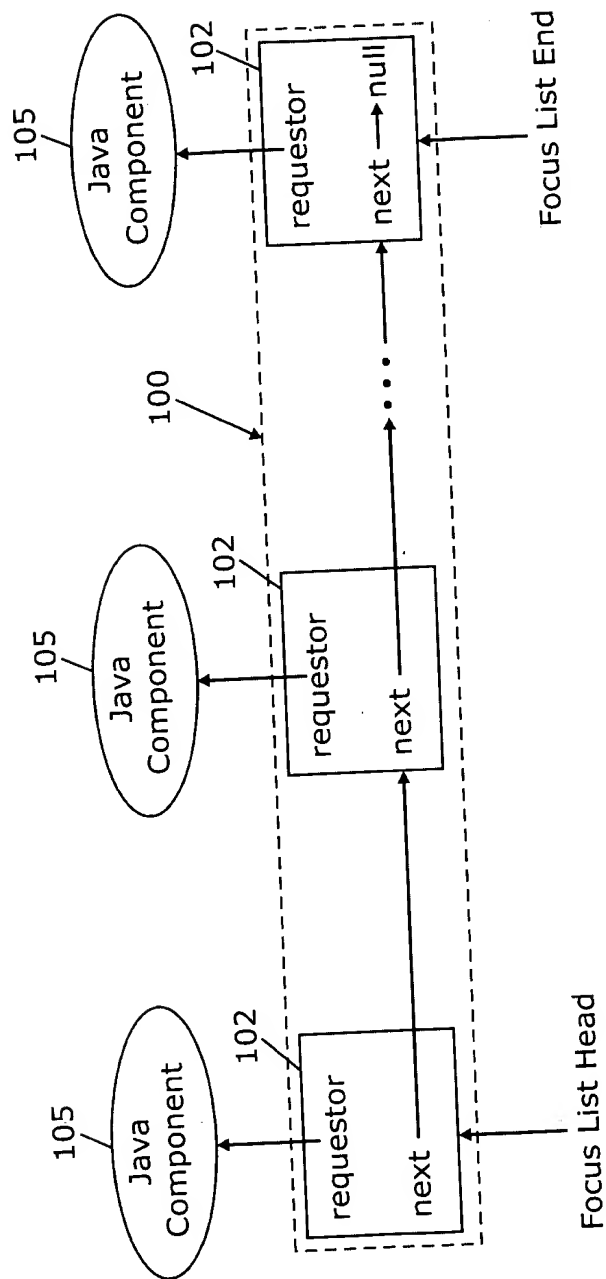


FIGURE 6



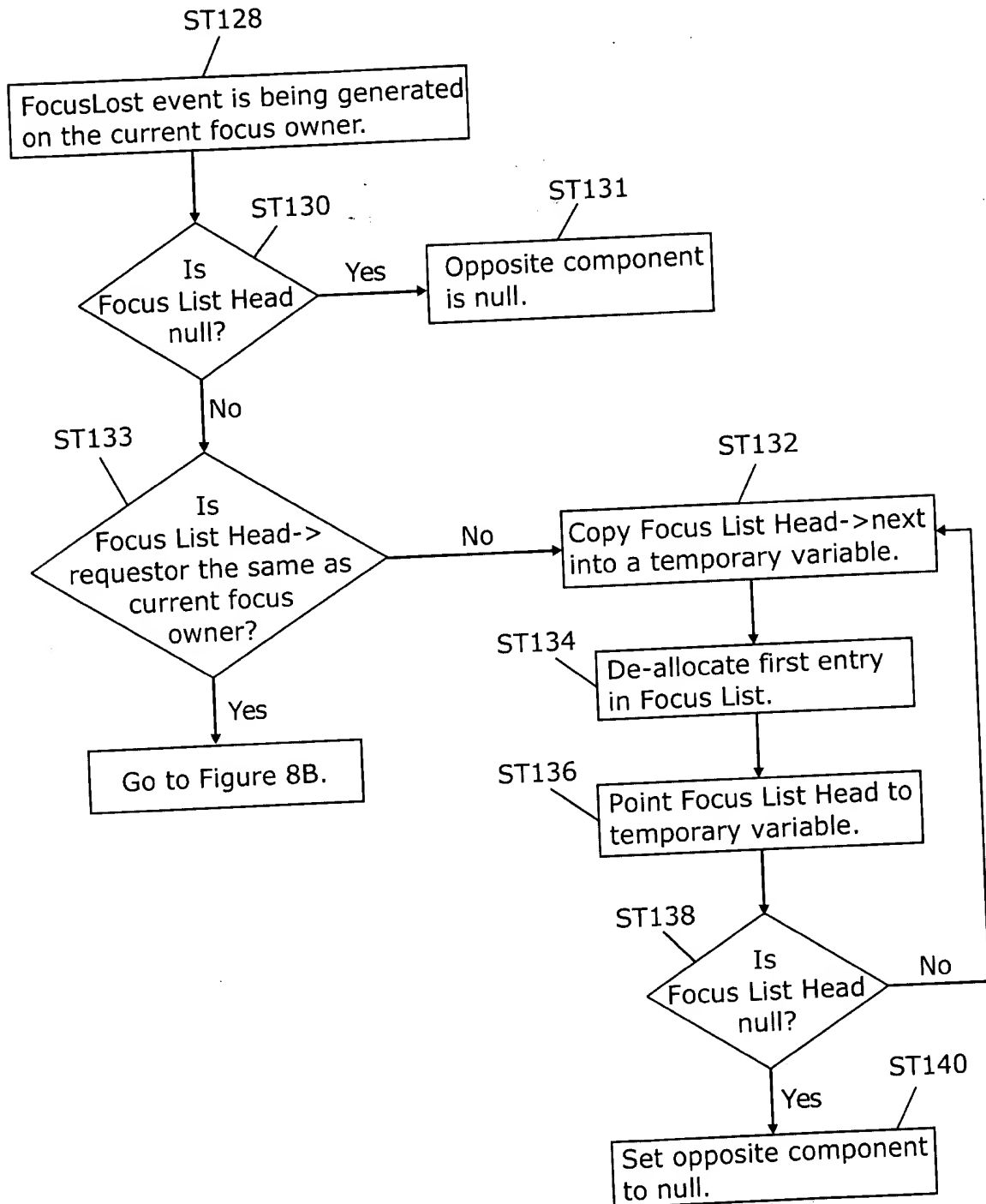
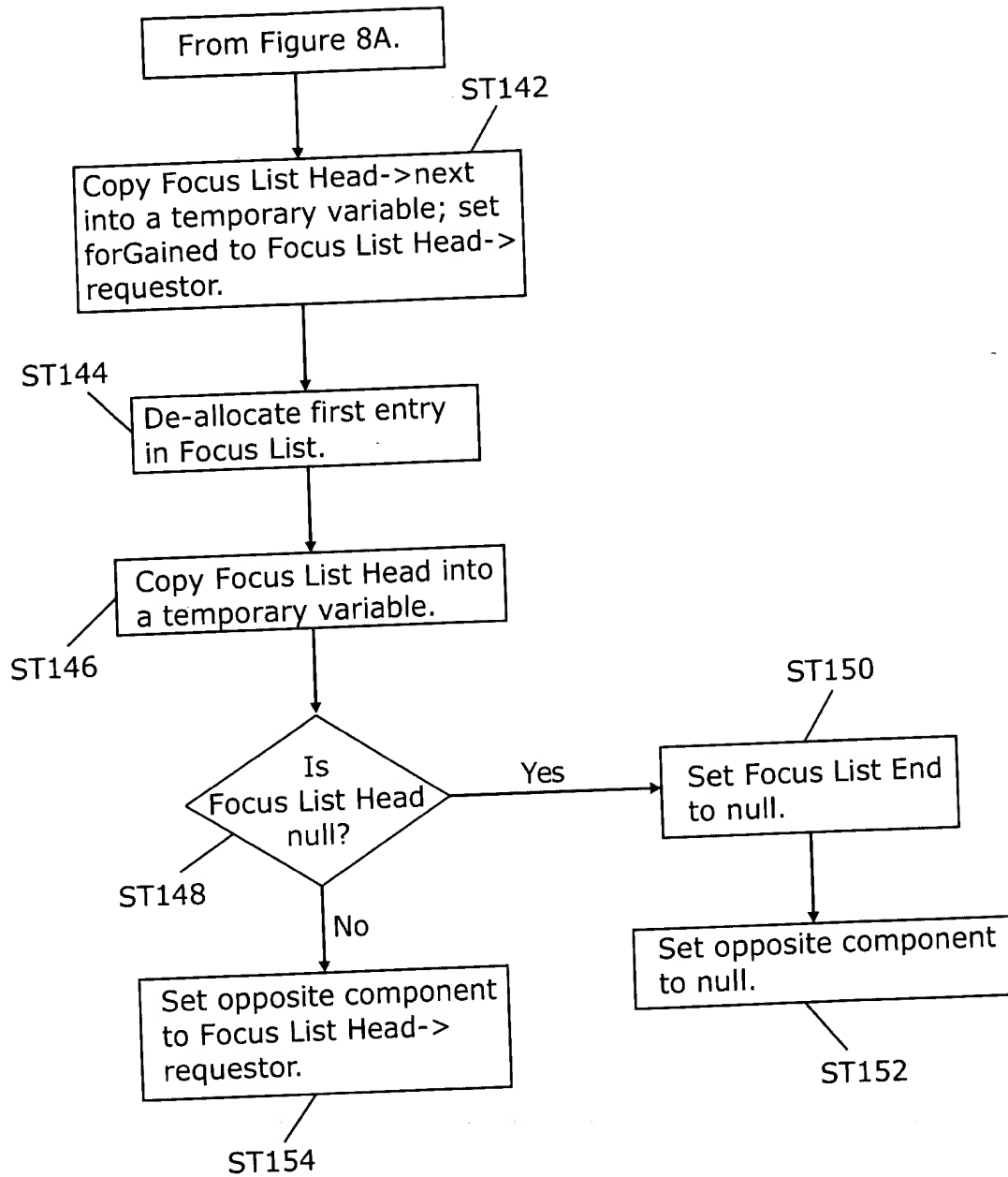


FIGURE 8A

FO2250-8509860

FIGURE 8B

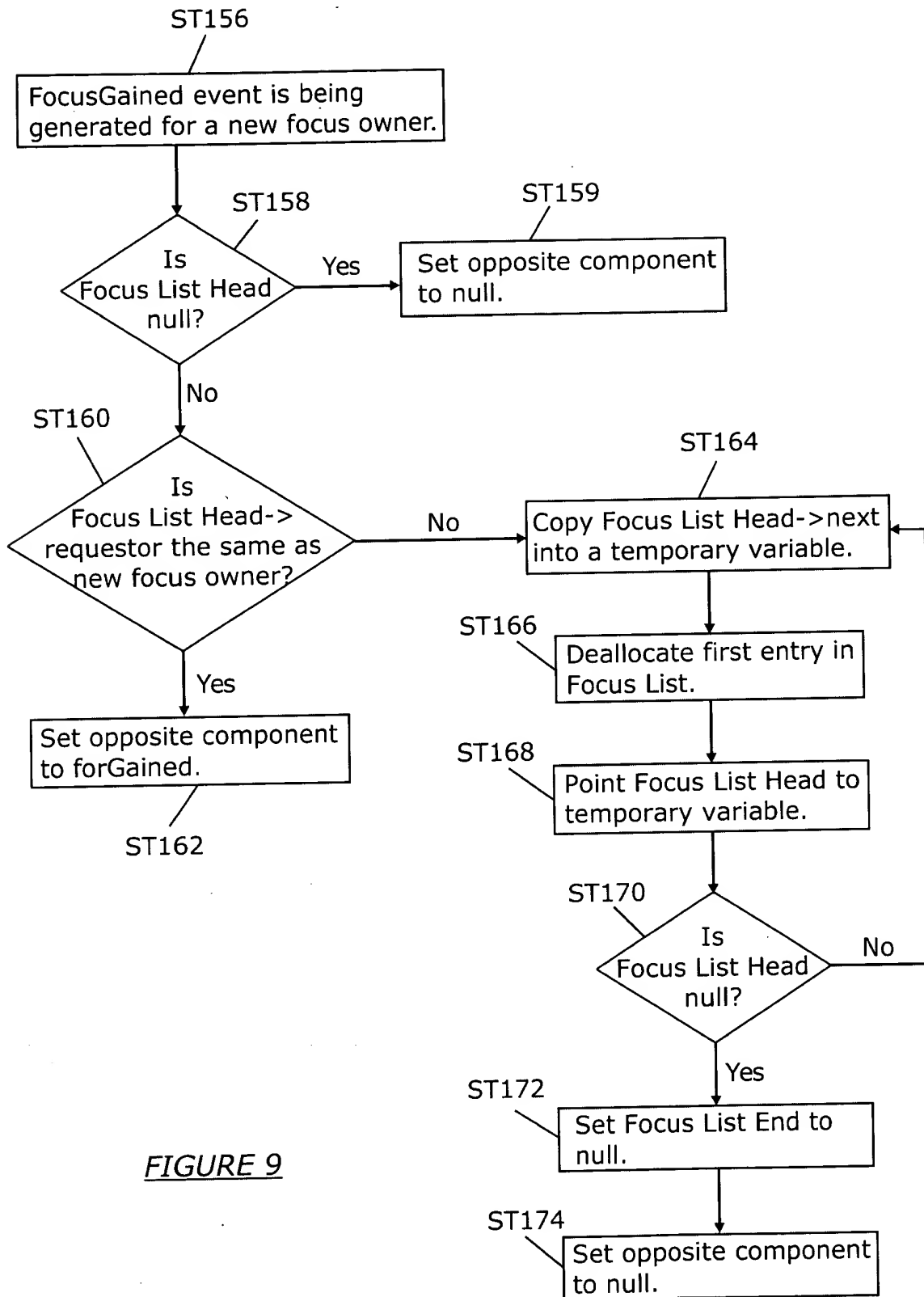


FIGURE 9

FOCUS.GAINED.052204